PIN SBB JAN 2004

Last Name*

VIRGINIA STATE CORPORATION COMMISSION BUREAU OF INSURANCE

PO BOX 1157 RICHMOND VIRGINIA 23218 804-371-9631 Overnight Mailing Address: 1300 E. Main Street, Richmond, VA 23219

APPLICATION FOR SURETY BAIL BONDSMAN LICENSE → FEE = \$50 (FIFTY DOLLARS)

THIS APPLICATION FORM IS USED WHEN APPLYING FOR THE ORIGINAL LICENSE AND THE RENEWAL OF THE LICENSE.

ALL INDIVIDUAL APPLICANTS MUST PROVIDE BOTH A STATE AND NATIONAL CRIMINAL BACKGROUND CHECK WHICH MAY BE OBTAINED BY SUBMITTING A FINGERPRINT CARD AND THE \$37 FEE TO THE VIRGINIA STATE POLICE. IF YOU FAIL TO PROVIDE BOTH OF THESE CRIMINAL BACKGROUND CHECKS, THE BUREAU WILL REFUSE TO ISSUE A LICENSE TO YOU. (§§ 38.2-1865.7.B.3. AND 38.2-1865.11 OF THE CODE OF VIRGINIA.)

Complete Individual or Agency; not both. No personal checks will be accepted unless certified, and no cash will be accepted. The fee is nonrefundable.

INDIVIDUAL

Middle Name (Initial or None)*

First Name*

Birth Date*

SS# or VA DMV-Assigned # *

Residence/Home Add	ress (Ph	nysical Street)*				State, Zip*		
Mailing Address			P.O.	Box	City, State, Zip			
Home Phone No.	Busine	ess Phone No.*	Busine	ess Fa	x No.	Business E-Mail Address		
Business Name*						ssumed or Fictitious Name (If transacting under a name her than your own)		
Business Address (Physical Street)*			P.O.	Box*	City, State, Zip*			
AGENCY (a corporation, a partnership, or a limited liability company)								
FEIN*	Α	gency Name*						
Business Address (Physical Street)*			P.O. Box		City, State, Zip*			
Mailing Address			P.O.	Box	City, State, Zip			
Business Phone Numb	er*	Business Fax N	lumber		Busin	ess E-Mail Address	Business Web Site Address	
*DESIGNATED INDIVIDUALS - Attach additional sheet if necessary. Designated individuals must be licensed as both a Property and Casualty agent and a Surety Bail Bondsman.								
NAME		SSN			RES	SIDENCE ADDRESS		

Name of Applicant: JA	PIN SBB AN 2004
PART 2 1. Have you ever been the subject of an administrative proceeding or disciplinary action of any kind regarding any insurance professional or occupational license, including: revocation or suspension of a license; refusal to issue or renew a license penalty; settlement or consent order; or agreement to voluntarily surrender a license as the result of a complaint or investiga Yes No If so, and you have not previously filed this information with this Bureau, attach a copy of the document which demonstrates the charges and final judgment and a detailed explanation.	se; fine or ation?
 2. Have you ever been convicted of (or pled guilty or nolo contendere to) a violation of law, other than minor traffic violations? Yes No Whether you check Yes or No, you MUST provide both a state and national criminal background check ALL APPLICANTS: If you answered "yes," you must attach to this application: a) a written statement explaining the circumstances of each incident, b) a certified copy of the charging document, c) a certified copy of the official document which demonstrates the resolution of the charges or any final judgment, d) if applicable, a letter from the federal or state probation and parole office outlining your performance or sa completion of your probationary period, and e) If you have been convicted of a felony, you must provide proof that your civil rights have been restored by the Go other appropriate authority. If you have been convicted of a felony and your civil rights have not been restored, you apply. 	atisfactory
3. If currently or previously licensed and/or appointed as a Surety Bail Bondsman, are you indebted to any insurance of agency, or other person for premiums collected, or is there any other dispute regarding your insurance account? Yes No Not Applicable If so, and you have not previously filed this information with this Bureau, attach a sheet and give full particulars. PART 3 - ALL APPLICANTS	company,
 All applicants must be actively licensed as a Property and Casualty insurance agent before applying for a Surety Bail B license and must keep that license in effect at all times. All applicants must provide to the Commission copies of each power of attorney required to be recorded pursuant to § 38.2-2 PART 4-ALL AGENCIES 	
Virginia law requires each agency at the time of application to designate a licensed Virginia Surety Bail Bondsman to be respothe business entity's compliance with the laws of Virginia. The agency's surety bail bondsman license will terminate immediately designated individual is removed and a new individual has not been appointed and the Bureau notified within 30 calendar days. PART 5- NON-RESIDENT AGENCIES ONLY 1. Attach a current (no more than 90 days old) certification from the state insurance department where the a incorporated/domiciled or where the principal office is located. 2. A copy of the "certificate of authority" issued by the Clerk of the Commission is required for an entity. The "certificate of au available by contacting the Clerk's Office at 804-371-9733. Failure to provide a copy of the "certificate of authority" will resapplication being denied.	if the last agency is uthority" is
PART 6- RENEWAL NOTICE The nonrefundable renewal fee is due every two years prior to <u>June 1</u> . The license expires on the second June 30 following th issue . Both a state and national criminal background check is required in order to renew the license. PART 7- IMPORTANT NOTICE	e date of
The submission of this application signifies the applicant's understanding and agreement to abide by the requirements outlined 6.2 (§ 38.2-1865.6 et seq.) of Chapter 18 of Title 38.2 of the Code of Virginia.	in Article
Section 38.2-1865.10 E of the Code of Virginia requires each agency to notify the Bureau within 30 calendar days of removal o licensed Surety Bail Bondsman as designee for any reason, along with the required information as to the new individual license Bail Bondsman designated as the replacement. Failure to do so is grounds for immediate license revocation for the business well as additional sanctions for violation of the statutory requirement.	ed Surety
By applying for this license, you are agreeing that personal information relevant to your status as a licensed surety bail bon Virginia, including but not limited to your name, residence/business address, social security number/FEIN, date of birth, lice appointment status, and investigation or disciplinary action summary data may be reported to the National Association of I Commissioners and to other state insurance regulatory authorities or other interested parties. PART 8 - APPLICANT'S CERTIFICATION AND ATTESTATION I hereby certify, under penalty of perjury, that all of the information submitted in this application and attachments thereto is true are complete. I am aware that submitting false information or omitting pertinent or material information in connection with this application grounds for denial of this application or future license revocation if the license applied for is issued, and that I may also be subject or criminal penalties.	ense and Insurance nd ation is